

Name in Full

Issie Elizabeth Anderson

Died at

Town Brunswick

County

Fredrick

MARYLAND

Date 1898

Month

6

Day

26

Age

Y.

19

M.

11

D.

15

Native of

Md

Occupation

Housewife

~~Male~~

White

Married

~~Widow~~

~~Divorced~~

Female

~~Colored~~

~~Single~~

~~Widower~~

Number of children living

1

Husband of

Bobit-C Anderson

Father's Name

John N Anderson

Mother's Name

Louise Anderson

Cause of

Primary

Death Immediate

Consumption

22a

How long sick

11 months

~~Accident, Suicide, Homicide~~

Reported by

C. S. Pether M.D.

Address

Brunswick Ing.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Joseph J. Cain

Died at ^{Town} *Plane # 4*

County *Fredricks*

MARYLAND

Date 189 *8* Month *6* Day *16* Age *71* Y. M. D. Native of *Fredricks* Occupation *Farmer*

Male Female White Colored Married Single Widew Widower Divorced Number of children living *4*

Husband of *Not know wife name*

Father's Name _____ Mother's Name _____

Cause of Death { Primary *Paralysis* Immediate *4*

How long sick *6 months*
Accident, Suicide, Homicide

Reported by *Dr J W Downey*

Address *Wm Market*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

